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PTO/SB/21 (09-04)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/780,342	
	Filing Date	February 17, 2004	
	First Named Inventor	Christopher J. Misorski	
	Art Unit	3617	
	Examiner Name	Lars A. Olson	
Total Number of Pages in This Submission	20	Attorney Docket Number	1636-00564 (M09719)

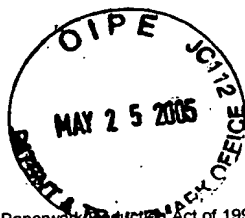
ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Andrus, Sceales, Starke & Sawall, LLP	
Signature	<i>Michael E. Taken</i>	
Printed name	Michael E. Taken	
Date	5/23/2005	Reg. No. 28,120

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:		
Signature	<i>Christine S. Lewis</i>	
Typed or printed name	Christine S. Lewis	Date 5/23/2005

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PTO/SB/17 (12-04)

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$)**\$0.00****Complete if Known**

Application Number	10/780,342
Filing Date	February 17, 2004
First Named Inventor	Christopher J. Misorski
Examiner Name	Lars A. Olson
Art Unit	3617
Attorney Docket No.	1636-00564 (M09719)

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 01.2000 Deposit Account Name: Andrus, Scales, Starke & Sawall, LLP
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

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FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
18	20	=	x	=	\$0.00	
HP = highest number of total claims paid for, if greater than 20						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
5	5	=	x	=	\$0.00	
HP = highest number of independent claims paid for, if greater than 3						

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 =	/ 50 =	(round up to a whole number) x	\$0.00

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: _____

SUBMITTED BY

Signature	<u>Michael E. Taken</u>	Registration No. (Attorney/Agent)	28,120	Telephone	414-271-7590
Name (Print/Type)	Michael E. Taken	Date	5/23/2005		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Expedited Procedure
Response After Final
Group Art Unit: 3617

PATENT
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 10/780,342)	<u>CERTIFICATE OF MAILING</u>
Applicant : Christopher J. Misorski)	
Filed : February 17, 2004)	I hereby certify that this
Title : Marine Drive Unit)	correspondence is being deposited with the
Overmolded With A)	United States Postal Service with sufficient
Polymer Material)	postage as first class mail in an envelope
)	addressed to: Commissioner for Patents,
TC/A.U. : 3617)	P.O. Box 1450, Alexandria, VA 22313-
Examiner : Lars A. Olson)	1450 <u>23rd</u> day of <u>May</u> , 2005.
)	<i>Christine S. Lewis</i> <u>5-23-05</u>
Docket No. : 1636-00564 (M09719))	Christine S. Lewis Date

AMENDMENT AFTER FINAL

Mail Stop: AF
Commissioner of Patents
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Sir:

Responsive to the Office Action mailed April 1, 2005, please amend the above identified application as set forth below.

Amendments to the Claims are reflected in the listing of claims beginning on page 2. Claim 33 is newly added. The Amendment leaves claims 1-15, 18, 23, 33 pending.

Remarks/Arguments begin on page 5.